

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIAL	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		59	2/21
FORMALITY REVIEW	B/E	897	02-26-01
RESPONSE FORMALITY REVIEW	V/B	676	06/14/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 : Restricted O Objected

Claim	Date
Final	
Original	4/2/03
1	
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7	✓
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11	✓
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13	=
14	✓
15	=
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓
22	✓
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25	=
26	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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APPLICANTS

TITLE

AP